

MISCELLANY

Under this department are ordinarily grouped: News Items; Letters; Special Articles; Twenty-Five Years Ago column; California Board of Medical Examiners; and other columns as occasion may warrant. Items for the News column must be furnished by the fifteenth of the preceding month. For Book Reviews, see index on the front cover, under Miscellany.

NEWS

Coming Meetings.†

California Medical Association, Hotel Del Monte, Del Monte, California, May 4-7, 1942.

American Medical Association, Atlantic City, June 8-12, 1942.

American Medical Association Meeting of State Medical Association Secretaries and Editors, 535 North Dearborn Street, Chicago, Friday and Saturday, November 21 and 22, 1941.

Forum on Allergy: Fourth Annual Conference, Detroit, Michigan, January 10 and 11, 1942.

The Platform of the American Medical Association

The American Medical Association advocates:

1. *The establishment of an agency of Federal Government under which shall be coördinated and administered all medical and health functions of the Federal Government, exclusive of those of the Army and Navy.*

2. *The allotment of such funds as the Congress may make available to any state in actual need for the prevention of disease, the promotion of health, and the care of the sick on proof of such need.*

3. *The principle that the care of the public health and the provision of medical service to the sick is primarily a local responsibility.*

4. *The development of a mechanism for meeting the needs of expansion of preventive medical services with local determination of needs and local control of administration.*

5. *The extension of medical care for the indigent and the medically indigent with local determination of needs and local control of administration.*

6. *In the extension of medical services to all the people, the utmost utilization of qualified medical and hospital facilities already established.*

7. *The continued development of the private practice of medicine, subject to such changes as may be necessary to maintain the quality of medical services and to increase their availability.*

8. *Expansion of public health and medical services consistent with the American system of democracy.*

Medical Broadcasts.*

Los Angeles County Medical Association.

The following is the Los Angeles County Medical Association's radio broadcast schedule for the month of November, 1941:

Saturday, November 1—KFAC, 8:45 a. m., Your Doctor and You.

Saturday, November 1—KFI, 10 a. m., The Road of Health.

Saturday, November 8—KFAC, 8:45 a. m., Your Doctor and You.

Saturday, November 8—KFI, 10 a. m., The Road of Health.

† In the front advertising section of *The Journal of the American Medical Association*, various rosters of national officers and organizations appear each week, each list being printed about every fourth week.

* County societies giving medical broadcasts are requested to send information as soon as arranged (stating station, day, date and hour, and subject) to CALIFORNIA AND WESTERN MEDICINE, 450 Sutter Street, San Francisco, for inclusion in this column.

Saturday, November 15—KFAC, 8:45 a. m., Your Doctor and You.

Saturday, November 15—KFI, 10 a. m., The Road of Health.

Saturday, November 22—KFAC, 8:45 a. m., Your Doctor and You.

Saturday, November 22—KFI, 10 a. m., The Road of Health.

Saturday, November 29—KFAC, 8:45 a. m., Your Doctor and You.

Saturday, November 29—KFI, 10 a. m., The Road of Health.

Children's Bureau Needs Maternal and Child Health Specialists.

Employment registers are to be established by the Civil Service Commission to fill maternal and child health specialist positions in the Children's Bureau of the Department of Labor. Vacancies in similar positions in state agencies cooperating with the Children's Bureau may also be filled from these registers at the request of the states concerned. The examination announcement just issued by the Civil Service Commission to recruit persons for these positions, which pay from \$3,200 a year to \$5,600 a year, allows the filing of applications until November 15, 1941.

There are three options in which persons may qualify—pediatrics, obstetrics, and orthopedics. For each of these options employment lists will be established for administrative, research, and clinical positions. . . .

Persons who wish to apply for this examination are advised that further information and application forms may be obtained from the Commission's representative at any first- or second-class post office or from the central office in Washington, D. C.

Cyclotron Valuable to Medicine.—The cyclotron is a new hope in medicine's search for the causes and treatment of diseases, according to Dr. John H. Lawrence, in charge of medical applications of the University of California atom-smasher.

Doctor Lawrence delivered the Caldwell Lecture at the annual meeting of the American Roentgen Ray Society.

Doctor Lawrence pointed out that valuable contributions to biology have been made, using the artificial radio-active elements produced in the cyclotron, but that "the surface has only been scratched."

Already, he pointed out, one of these elements, phosphorus, has been used to control polycythemia, a rare and fatal disease characterized by an overproduction of the red blood cells.

Radio-active phosphorus has also proved helpful in treating leukemia, a more common fatal disease characterized by overproduction of the white blood cells.

More than a score of the two hundred artificial radio-active elements produced in the cyclotron have proved useful in fundamental biological research, Doctor Lawrence said. Because they decay and emit rays, these elements can be traced in the body and in plants.

He said that the radio-active elements are being built into chemical compounds and dyes commonly found in the body and their distribution traced.

The Caldwell lecturer is chosen for outstanding contributions to roentgenology, the science of the treatment of disease with radiation. Doctor Lawrence is the twenty-second lecturer. Among previous lecturers have been Dr. Robert A. Millikan of the California Institute of Technology and Dr. Walter B. Cannon of Harvard University.

Erratum.—On page 210 of the October issue, the reference to reprints was in error. These were obtainable from the Los Angeles County Medical Association, although printed by the American Medical Association. The American Medical Association Order Department will send a price list of publications, on application.

Unregistered Births.—A recent birth registration test, conducted by the United States Bureau of the Census, revealed the startling information that there were twenty-eight unregistered births within the jurisdiction of the Los Angeles County Health Department during the four months period under study. Of this number, fifteen were hospital births. Physicians in attendance upon births are urged by the Los Angeles County Health Department Division of Vital Statistics to make certain that birth certificates are properly filed.

Doctor Kellogg Retires.—Dr. Wilfred Harvey Kellogg, the first man to make a bacteriological diagnosis of plague in the United States, retired on September 3.

Born in Kansas, Doctor Kellogg received his medical degree from the University of California in 1896. Shortly thereafter he entered the laboratory of the San Francisco Health Department. It was while there that he made his famous plague diagnosis.

Since that time, with the exception of two years spent with the United States Public Health Service, Doctor Kellogg has been associated in various capacities with the San Francisco Health Department, the California State Board of Health, the Stanford University School of Medicine, and the University of California Medical School.

From 1929 until his retirement he was chief of the Division of Laboratories of the California State Board of Health.

Sulfonamides—Clinical Aids in Recognition of Toxic Effects.—Following item is from the weekly report of the Department of Health of the City of Los Angeles:

In the intensive use of the sulfonamide drugs the resultant publicity following their investigation has sometimes overemphasized their possible toxic manifestation. Though such an attitude is necessary and justified, growing experience with these drugs makes it possible for the average physician to use them freely and without too much worry about their possible toxic effects.

Toxic reactions are frequent, but those which are dangerous are relatively uncommon.

Perrin Long suggests laboratory control whenever possible, but also notes that practically all the toxic reactions associated with the administration of these drugs can be detected by the physician with *careful clinical control*.

Patients should be seen often and inquiry made for the symptoms of headache, body aching or malaise. In addition, observe the sclerae for jaundice and the conjunctivae for injection or paleness. Jaundiced sclerae, pale conjunctivae may connote impending *hemolytic anemia*. Jaundice without pale conjunctivae probably results from liver damage. Injected conjunctivae and sclerae, together with smarting and burning of the eyes, occurs as a toxic manifestation of sulfathiazole therapy. The oral mucous membrane should be examined and patient questioned for symptoms of sore throat. The latter symptom in patients using sulfonamides for more than one week may indicate the beginning of an agranulocytosis.

The skin should be checked for fine macular rash, which is frequently missed by the patient or his attendant. Patients should avoid direct sunlight and ultra-violet light because of a photosensitization phenomenon.

Temperature should be noted to detect drug fever.

Kidneys: Urine should be watched and measured. Minimum output should not be less than 1,000 cubic centimeters daily. Hematuria is an indication for stopping therapy.

Conclusion: With the possible exception of leukopenia or agranulocytosis, all toxic reactions can be discovered if patient is kept under careful observation. If toxic manifestations appear, these drugs should be discontinued and fluids forced to eliminate them from the system as rapidly as possible.

American College of Surgeons.—In accordance with Article III, Section 5, of the By-Laws, the annual meeting of the Fellows of the American College of Surgeons is called for 1:45 o'clock on the afternoon of Thursday, November 6, 1941, in the ballroom, Copley Plaza Hotel, Boston, Massachusetts. In addition to the routine business, reports of officers and standing committees will be presented. Each Fellow of the College is respectfully urged to be present.

Educational Program of California Tuberculosis Associations.—The annual educational program sponsored by the tuberculosis associations in California is now being planned. It is carried on in April each year, and is known as the "Early Diagnosis Campaign."

The theme for 1942, "Tuberculosis—Find it—Treat it—Conquer it," was selected by the committee of the National Association of Tuberculosis Secretaries; and the material to be used, including pamphlets, leaflets, posters, and charts, was prepared under the supervision of the committee of the American Trudeau Society.

A preview of the material impresses the reader with the modern trends in health education literature. Attractive titles, handsome layouts and printing jobs, and easy-to-read content, characterize this new packet of educational material.

Such titles as "Element'ry, my dear Holmes, element'ry," "Let's Take 2 Minutes to Check," "How Not to Save \$300," "Puzzles Are Easy—If One Knows the Answers," all draw attention to the cleverly worded and profusely illustrated pamphlets designed for distribution to the various community groups.

These educational programs are coöperative efforts of local physicians, official health agencies and volunteer citizen groups to find unknown cases of tuberculosis and bring them to treatment; to educate the public on the need for concerted action in order to cut down the toll which this disease takes each year.

The work is supported by the annual sale of Christmas Seals which, this year, opens on November 24.

Undermining Medical Practice.—If it were not so serious, one could derive a certain amount of amusement from the clamor that periodically arises when some branch of medicine is encroached upon by nonprofessionals and is tolerated and even encouraged by the law. In the years gone by ophthalmology has given birth to the optometrist and optician. General practice has sired the physiotherapist. Anesthetists are responsible for the large number of nurses who have intruded into the specialty. There has even been a movement to qualify laymen as "audiometrists" who would be eligible to test hearing with an audiometer.

We, as a whole, have no one but ourselves to blame for this situation. It is a result of carelessness, but more so of indolence in the performance of the time-consuming details attendant upon every branch of medicine. Others have been quick to see the lucrative possibilities of these stepchildren of medicine. They have had our unconscious support in the development of these fields during the past decade and a half, when the medical profession was intense in the encouragement of specialization.

When the world depression began to affect the income of physicians, it began to dawn upon us that we had relinquished a considerable source of revenue which rightly belonged to the doctor. Rectification of the situation was impossible. There are still fields in which there is a tendency to relegate medical functions to laymen. In radiology, dermatology, and orthopedics—to name a few—one sees this inclination all the time. If we are not to be further encroached upon, it is up to us, and us alone, to stop it.—*N. Y. Jour. Med.*, October 1, 1941.

Los Angeles County Examination for Physician.—A \$275 a month position in Los Angeles County is seeking a qualified physician to fill it, according to an announcement just made by the Los Angeles County Civil Service Commission.

The position is that of physician, M. D. (communicable disease) in the County Health Department, and the Civil Service Commission has announced an open competitive examination with the usual three-year county residence requirement waived in order to obtain the most competent man for it. Candidates must be not over forty-five years of age, have been graduated from an approved medical school, and have completed a one-year internship in an approved hospital. A residency or second year of internship, including service in a communicable disease unit, is desirable, as is experience in public health work.

Applications to take the examination must be filed with the Los Angeles County Civil Service Commission, Room 102, County Hall of Records, by Wednesday, November 12.

Definition of the Word "Biopsy" Is Given by The Journal of the American Medical Association.—Language is constantly changing, according to *The Journal of the American Medical Association*. The sense of a word in common usage may diverge so far from the dictionary definition that redefinition may be required.

Consider the word "biopsy." The dictionaries agree essentially in defining biopsy as the examination for purposes of diagnosis of a portion of tissue removed from the living body. Usage, however, seems to make "biopsy" mean the process of removing the living tissue rather than the examination. . . .

The following working definition will be followed in the future in the use of the word "biopsy" in publications of the American Medical Association: "The removal and examination of a piece of tissue from the living body for purposes of diagnosis (usually microscopic)." For example, the phrase "biopsy of lymph node" will mean the procedure of removal and examination, and "the biopsy showed . . ." will refer to the results of the examination as part of the whole procedure.

Federal Aid to Schools of Nursing.—Eighty-eight schools of nursing selected by the United States Public Health Service to receive federal aid in training additional student nurses have been named by Surgeon-General Thomas Parran.

Sixty-seven schools in thirty-two states will offer refresher courses to 3,000 graduate nurses, and twenty-six schools will enroll 500 graduate nurses for postgraduate study. A total of \$1,200,000 is available for the program, which includes field-training centers for public health nursing.

The student-nurse training program will increase enrollment by 2,000 young women in this country, Hawaii, and Puerto Rico. Surgeon-General Parran has estimated a need for 50,000 student nurses this year, and the federal program will bring the total to about 42,000. The average yearly enrollment is slightly under 40,000. It is hoped schools able to increase their enrollment without federal aid will meet the deficiency. . . .

California schools in the list include: Santa Clara Hospital School of Nursing, San Jose; Los Angeles County General Hospital School of Nursing, Los Angeles.

Pharmacological Items of Potential Interest to Clinicians.—An informal bulletin from the University of California Department of Pharmacology reports:

1. *From Neighboring Americans:* Well-developed new periodical, *Revista Medica Municipal* (Rio de Janeiro) carries neat report by J. Goulart on KCl by mouth for relief of congestive cardiac edema (1:681, 1941). J. Bullo (Rev. Neurol., Buenos Aires, 6:16, 1941) surveys Takata-

Ara reaction in cerebrospinal fluid. A. Stabile (Arch. Urug. Med. Cirur. Espec., 18:79, 1941) shows estrone increases tone of insufflated fallopian tubes, while progesterone diminishes it. M. Robortella (Arq. Cirur. Clin. Exper. Sao Paulo, 5: Suppl. 1, 1941), describes significance of Lemos Torres' sign in diagnosing pleural effusion when x-ray is inadequate. B. A. Houssay, E. B. Del Castello, and A. Pinto (Rev. Soc. Argent. Biol., 17:26, 1941) confirm corticosterone inhibition of thymus, finding adrenal cortex extirpation produces thymic and lymphatic hyperplasia inhibited by cortex or gonad hormone administration. From Houssay's always productive laboratory comes also a full discussion with Francis S. Smyth and V. G. Foglia of the diabetogenic action of anterior pituitary extracts from different animals (*ibid.*, p. 5). G. C. Bertani (Rev. Aso. Med. Argent., 55:367, 1941) reviews gold therapy in chronic rheumatism. F. F. Rocca and A. G. Falcone (*ibid.*, p. 434) report estrone helpful in hyperthyroidism. For full index of current Latin-American medical periodicals, see back pages of each issue of *Revista Medica Latino-Americana* (Buenos Aires); you may be surprised.

2. *Personal:* Note with regret the death of A. J. Clark, Professor of Pharmacology at Edinburgh, author of useful "Applied Pharmacology" (eighth edition, just issued), and leading contributor to modern pharmacological theory (Mode of Action of Drugs on Cells, Balt., 1933; General Pharmacology, Hdb. Exper. Pharmacol., Erganz. Bd. 4, Berlin, 1937). Clinicians desiring to understand some of the factors involved in "Variations in the Individual Response to Drugs" would do well to read his article of that title (Edin. Med. Surg. J., 42: Trans. Med. Chir. Soc., January, 1935). Available for research contact deserved and desired: Nobel prizeman O. Loewi in New York; P. Pulewka, Professor of Pharmacology at Ankara; Tiffeneau's Parisian associate, M. R. Cahen, in care of P. Vandewiele, Chateauroux, India; E. Starkenstein, Amsterdam; H. Handovsky, Ghent, and A. Rabbeno, Torino. From the Drug Addiction Committee of the League of Nations, P. J. O. Wolff has gone to Buenos Aires. H. H. Anderson and I. Snapper have returned to their posts at Peiping Union Medical College.

3. *Tooting Our Own:* J. G. Hamilton, M. H. Soley, and K. B. Eichorn report on distribution of radio-iodine in human thyroid tissue, showing concentration in hyperplastic areas (Univ. Calif. Publ. Pharmacol., 1:339, 1940). A. Palmer discusses bio-assay of estrogens in ovariectomized mice (*ibid.*, p. 375). J. L. Morrison finds no public health hazard in use of monochloroacetic acid as a food and beverage stabilizer (*ibid.*, p. 397). G. A. Alles proposes in comprehensive survey that ionic size is limiting factor in intensity of muscarine or nicotine type of action of alkyl-ammonium ions (*ibid.*, 2:1, 1941). D. F. Marsh reports on anesthetic possibilities of largest single group of potential inhalation anesthetics ever surveyed, forty-eight vinyl type brom and chlor olefins (*ibid.*, 2:39). B. E. Abreu and R. B. Aird discuss disappearance of acacia from cerebrospinal fluid (*ibid.*, 2:79).

4. *Other Notes:* G. Bohmanson and E. B. Norup (Act. Chirur. Scand., 84:427, 1941) report large amounts of serum with sulfonamide greatly improves prognosis in diffuse peritonitis, but not in local. G. J. Martin, M. R. Thompson, and J. Carvajal-Foreno (Am. J. Diges. Dis., 8:290, 1941) find that of the vitamin B complex, nicotinamide decreases alimentary tract motility while inositol increases it. H. M. Mackay (Arch. Dis. Child., 16:1, 1941) finds atropin methyl nitrate ("eumydrin") 0.1 to 1 milligram daily in divided doses, with feeding very helpful in hypertrophic pyloric stenosis. In H. H. Kessler's "Accidental Injuries: Medico-Legal Aspects of Workmen's Compensation and Public Liability" (second edition, Philadelphia, 1941), Chapter 19 deals with industrial poisoning, with full bibliography.

Scientific Exhibit at Next Year's Del Monte Annual Session.—Exhibits may consist of charts, graphs, photographs, motion pictures, roentgenograms, specimens, apparatus and instruments. Members of the California Medical Association are invited to correspond with the Secretary-Editor in regard thereto. Prizes and certificates are awarded for the best exhibits.

Tons of Medicine Rushed to U. S. S. R.—Chairman Norman H. Davis of the American Red Cross announced he had given instructions to forward immediately 800 tons of medical supplies now in England to the U. S. S. R. Through the cooperation of the British Red Cross, to which these supplies were consigned, immediate shipment is being made. The supplies will be replaced to the British Red Cross by similar stocks from the United States.

Coincident with this immediate aid to the war-wounded soldiers and civilians in Russia, Chairman Davis announced that an additional \$250,000 worth of medical supplies will be sent direct from the United States to Russia. A shipment from this purchase is en route, containing hospital garments, surgical dressings, and large quantities of insulin and gas gangrene serum and antitoxin. The remainder of the \$250,000 worth of supplies now is being readied at American ports for shipment. This will include drugs of all types, five million surgical dressings, quantities of surgical instruments and other hospital supplies.

Pay-Your-Doctor Week.—Fourth annual "Pay-Your-doctor Week" was observed this year, November 2 to 8. Inaugurated in 1938 by California Bank in Los Angeles, observation of "Pay-Your-Doctor Week" swiftly spread to scores of cities throughout the country, and last year virtually achieved nation-wide recognition.

Primary purpose of "Pay-Your-Doctor Week" is to pay tribute to the members of the healing profession, who quietly but relentlessly continue the battle against disease and sickness, particularly at this time when much of the world is engaged in destroying rather than preserving life.

Recognized also is the fairly widespread tendency to "let the doctor wait" until all other bills have been paid.

Sponsors of "Pay-Your-Doctor Week" point out that the plight of the country doctor, who is often paid with farm products or a share in next year's crop, has been widely publicized in recent years, while little has been said about the city doctor, whose reward for services rendered all too frequently consists mainly of long hours of practice and vague promises of payment some time in the future.

Because "Pay-Your-Doctor Week" was originated and is sponsored by the banking profession, the question of medical ethics is not involved.

Banks sponsoring the week throughout the country call attention to the fact that funds are available to lend for the purpose of paying doctor bills.

Hospital Bed Facilities in the United States.—The most widespread survey ever made of hospital bed facilities in the United States has been released by the Census Bureau of the United States Department of Commerce, revealing that 1,282,785 beds were available in 9,614 institutions for the medical care of the American people in 1939.

The country's 6,991 hospitals and sanatoriums provided the great bulk of this care—355,145,063 patient-days, or the equivalent of one week-end stay in a hospital each year for every person in the United States. Infirmarys and nursing, convalescent, and rest homes provided the remainder.

Hospitals and sanatoriums had 1,186,262 beds—92 per cent of the nation's total. Census Bureau figures show that the average hospital had 169 beds and served 5,000 families. . . .

Even existing facilities are not being used fully, the Census Bureau Survey indicated. Allowing a margin of

reserve for epidemic peaks, the Committee on the Cost of Medical Care estimated that general hospitals would operate most efficiently with an occupancy of 80 per cent, and mental and tuberculosis hospitals with an occupancy of 90 per cent.

In 1939, general hospitals were operating at 70 per cent of capacity, tuberculosis hospitals at 85 per cent, and mental hospitals at 95 per cent. The Census Bureau noted that many mental hospitals are overcrowded, due to rapidly increasing hospitalization for this type of illness.

Although only 594 hospitals—less than one in ten—were for nervous and mental patients, they had 602,850 beds or more than one-half of the total for all types of patient. They gave 208,466,000 patient-days of care.

The 5,912 general hospitals gave 122,467,000 patient-days of care, and the 485 tuberculosis hospitals 24,212,000 patient-days.

Approximately 77 per cent of the care rendered in 1939 was in state, local, and federal government-controlled hospitals, 20 per cent in nonprofit institutions, and 3 per cent in proprietary institutions, the Census Bureau noted. The large proportion of care financed by taxes is due to government tuberculosis sanatoriums and government hospitals for mental patients.

California was classed with eighteen other states listed as having "adequate facilities," the state being credited with 85,365 beds, equivalent to 124 beds per 10,000 population.

Press Clippings.—Some news items from the daily press on matters related to medical practice follow:

A Doctor's Job

Several physicians were among the guests at a dinner party at a local home the other evening. Just as dinner was about to be served, one of them received a telephone call and left immediately. Two hours later he returned, in the meantime having performed an emergency operation for appendicitis upon a person he had never seen before. He sat down to a meal that was not so good as it had been a couple of hours earlier.

This little happening is a commonplace sample of what happens constantly in the lives of physicians. Under our present system of privately operated medical practice, physicians are always ready to aid. Somehow we have an idea that if we had some form of state medicine, as is sometimes demanded, state-paid surgeons would not be so ready to sacrifice their comfort for the benefit of their profession.

At least that is usually the way it works when bureaus and bureaucrats take over.—San Jose News, October 2.

* * *

Insurance Men Conclude Meet

Convention in San Francisco Goes on Record Against Socialized Medicine

San Francisco.—The current trend toward state-administered medical care and socialized medicine was condemned in San Francisco yesterday by delegates to the twenty-eighth annual convention of the National Fraternal Congress of America, representing eighty-six fraternal insurance societies with a membership of more than seven million.

Concluding its five-day sessions, the convention adopted resolutions advocating prompt and satisfactory solution of the problems of public health and medical care in a manner best befitting the American way of life. . . .

Action of the convention stemmed in part from an address on Wednesday by Charles A. Togut on the political threat to medicine. Mr. Togut, a counselor at law of New York City, warned that state or governmental medicine may destroy the private practice of medicine.

"The paralyzing strangulation of the country's 50,000,000 voters through the politically controlled and dominated doctor will be the lost horizon of merciless bureaucracy," Mr. Togut asserted. "The moment we vest in the Government the care of the body, we imprison the political soul of every voter.

"The legislatures of every state, barring four, pondered over 200 bills relating to medical and hospital care, and several states deliberated far-reaching legislation to establish state-wide plans for public medicine. The Congress of the United States is weighing the destiny of our peoples and of our doctors with numerous authoritarian legislative medical measures. The battle of the century, the Government versus the American Medical Association, is